## PART B - FEE(S) TRANSMITTAL

together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450 Alexandria, Virginia 22313-1450 (571)-273-2885

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NSTRUCTIONS: This for	rm should be used for tran- respondence including the below or directed otherwise	Patent, advance or	ders and notific	cation	of maintenance fees v	vill be mailed	to the current	correspondence addre	ess as
	E ADDRESS (Note: Use Block 1 for	any change of address)			Note: A certificate of Fec(s) Transmittal. The papers. Each additional have its own certificate.	mailing can o is certificate ca il paper, such a of mailing or	nly be used for annot be used to as an assignment transmission.	or domestic mailings of for any other accomparent or formal drawing,	f the lying must
THOMSON LICT PATENT OPERAT PO BOX 5312	TIONS				Cer I hereby certify that th States Postal Service v addressed to the Mail transmitted to the USP	tificate of Ma is Fee(s) Tran vith sufficient I Stop ISSUE TO (571) 273-	iling or Trans smittal is being postage for fir FEE address 2885, on the d	smission g deposited with the U st class mail in an enve above, or being facs late indicated below.	nited elope imile
PRINCETON, NJ	08543-5312				Jacqu	eline Bu	ford	(Depositor's I	iame)
					Joeg	ueline	. Bug	lend (Sign	ature)
					Sep€e	mber 20,	2006	(	Date)
APPLICATION NO.	FILING DATE	1	FIRST NAMED II	NVEN	TOR	ATTORNEY I	OCKET NO.	CONFIRMATION NO	).
10/719,260	11/21/2003		Meinolf B	lawat		PD02	0110	2794	
TITLE OF INVENTION: M	ETHOD FOR CREATING	A PEER-TO-PEER	HOME NET	work	CUSING COMMON C	GROUP LABE	L		
	,								
APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE		TOTAL FEE(S) DUE		DATE DUE	
nonprovisional	NO	\$1400			\$300	\$17	700	09/20/2006	
EXAM	INER	ART UN	IT	CL	ASS-SUBCLASS				
LE, DANH C		2617			455-418000	•			
. Change of correspondence	e address or indication of "Fo	ee Address" (37	2. For printin	ng on t	he patent front page, lis	st	JOSEPH	S. TRIPOLI	
CFR 1.363).  Change of correspond	dence address (or Change of 22) attached.	Correspondence	(1) the name or agents OR		p to 3 registered paten natively,	t attorneys	•		—
	22) attached. ion (or "Fee Address" Indica		(2) the name	of a s	ingle firm (having as a or agent) and the nam	member a		r E. DUFFY	
PTO/SB/47; Rev 03-02 of Number is required.	or more recent) attached. Use	of a Customer		patent	attorneys or agents. If		3 MI CHAEL	A. PUGEL	
. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT (	print o	r type)			<del></del>	
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion	elow, no assignee of this form is NOT	data will appear La substitute for	r on th r filing	ne patent. If an assign gan assignment.	ee is identified	d below, the d	ocument has been file	d for
(A) NAME OF ASSIGNI					ITY and STATE OR C				
THOMSON LIC	ENSING ·		BOULOGN	ΝE,	BILLANCOURT	FRANCE			
lease check the appropriate	assignee category or catego	ries (will not be pri	nted on the pate	ent):	☐ Individual ☐ Co	orporation or o	ther private gro	oup entity Govern	ment
			. Payment of Fe			-		-	
a. The following fee(s) are Insue Fee	enciosed.	40		• /	ount of the fee(s) is en	closed.			
	mall entity discount permitte	ed)	Dayment by	credit	card. Form PTO-2038	is attached.			
Advance Order - # of			The Director	r is he	reby authorized by 3kg	rge the require	d fee(s), or cre	dit any overpayment, to copy of this form).	)
. Change in Entity Status	(from status indicated above	)	/			· · · · · · · · · · · · · · · · · · ·			
a. Applicant claims SI	MALL ENTITY status. See	37 CFR 1.27.			longer claiming SMAI				
The Director of the USPTO INTE: The Issue Fee and Properties as shown by the reco	is requested to apply the Issu ublication Fee (if required) vords of the Upited States Pate	nc Fee and Publicat vill not be accopled ent and Tradomark	ion Fee (if any) from anyone of Office.	or to r ther th	e-apply any previously an the applicant; a regi	y paid issue fer stered attorney	to the applica or agent; or th	ation identified above. he assignee or other par	ty in
Authorized Signature	Miched A	Gran	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Date Sep				
Typed or printed name	Michael A. Pu	gel (			Registration N	<sub>10.</sub> 57,36	8		

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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OIPE 40	
SEP 22 JOHN B	
TRADEMET	

4. OTHER FEE(S)

Issue Fee

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Effective on 12/08/2004.  Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known					
				Application Number	10/719,20	10/719,260			
FEE TRANSMITTAL				Filing Date	11/21/20	11/21/2003			
	for FY	2006		First Named Inventor	r Meinolf B	Meinolf Blawat et al.			
1				Examiner Name	Danh C. I	Danh C. Le			
☐ Applicant claim	y status. See :	37 CFR 1.27	Art Unit	2617		·			
TOTAL AMOUNT O	F PAYMENT	(\$) 1700	.00	Attorney Docket No.	PD02011	PD020110			
METHOD OF PAYMENT (check all that apply)  Check Credit card Money Order Other (please identify):									
Customer Number 2  Deposit Accour		ount Number 07	0022	Donneit Apparent N	Name:	THOMSON HOTHOR			
_ '	•			Deposit Account N y authorized to: (che		THOMSON LICENSI  IPPIV)	NG INC.		
	•			· _ ·			t for the filing fee		
Charge a	ny additiona	I fee(s) or und	lerpayments o	f 🛛 Credit any	overpaym	ents	_		
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WARNING: Information information and author			olic. Credit card in	ntormation should not	t be included	on this form, Provi	de credit card		
FEE CALCULATION									
1. BASIC FILING, SE	ARCH, AND	EXAMINATION	N FEES						
	FILING F	EES Small Entity	SEAR	H FEES EXAMINATION FEES Small Entity Small Entity					
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)		
	300	150	500	250	200	100	rees raid (4)		
Utility Design	200	100	100	250 50	130	65			
Plant	200	100	300	150	160	80			
Reissue	300	150	500	250	600	300			
Provisional	200	100	0	0	0	0			
1 Tovisional	200	700	ŭ	ŭ	Ū				
2. EXCESS CLAIM F	EES					Small i			
Fee Description						Fee (\$)	<u>Fee (\$)</u>		
Each claim over 20 (inclu	•					50	25 100		
Each independent claim over 3 (including Reissues)						200 360	180		
Multiple dependent claim Total Claims		tra Claims	Fee (\$)	Fee Paid (\$)		Multiple Depende			
	or HP =	x viamis		<u> 1001 αια (φ)</u>		Fee (\$)	Fee Paid (\$)		
HP = highest number of									
Independent Claims		tra Claims	Fee (\$)	Fee Paid (\$)	-		•		
- 3 or HP = x = HP = highest number of independent claims paid for, if greater than 3.									
3. APPLICATION SIZE FEE									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer									
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets	Extra Sh	eets <u>N</u> ı	ımber of each a	additional 50 or frac	ction there	of Fee (\$)	Fee Paid (\$)		
100 =		/ 50 =	(rou	nd <b>up</b> to a whole nur	mber) x .		=		
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Total Fees \$1700.00							
SUBMITTED BY							
Name (Print/Type)	Michael A. Pugel	Registration No. (Attorney/Agent)	57,368	Telephone	317-587-4027		
Signature	Klashul A	Right		Date	Sept 20, 2006		
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Fees Paid (\$)

\$1700.00